

Ponderosa High School
Coconino County Regional Accommodation School District
School Year 2005-2006

Application for Enrollment

Applicant Information

Name _____ Today's Date _____
First Middle Last

Mailing Address _____ Male ☐ Female ☐
City State Zip

Home Phone: _____ Parent's Work Phone: _____

Date of Birth _____ State of Birth _____ Country of Birth _____

Social Security Number: _____ Desired Date of Entrance: _____

Ethnic Group: White ☐ Hispanic ☐ Black ☐ American Indian ☐ Asian/Pacific Islander ☐

Last School Attended

Name of School _____ Phone _____

Address _____
Street City State Zip

Grade Last Attended	Year Attended	SAIS Number
Date of Withdrawal	Reason for Leaving	

Has student ever been retained? _____ If Yes, Which Grade? _____

- Has the student ever received special education services? YES ☐ NO ☐
- Does the student have a current IEP? YES ☐ NO ☐
- If yes, which school district? _____

OFFICE USE ONLY

ENTRY DATE		ENTRY CODE	
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EMERGENCY INFORMATION:

In case of emergency, please contact: _____
NAME PHONE

Relationship: _____

Parent/Guardian Information

Father/Guardian Name

Mother/Guardian Name

Home Address

Home Address

City, State, Zip Code

City, State, Zip Code

Home Phone

Home Phone

Cell Phone

Cell Phone

Occupation

Occupation

Company

Company

Business Phone

Business Phone

Custodial Parent/Guardian: Father/Mother ☐ Father ☐ Mother ☐Other ☐ _____**In case of Emergency contact (other than parent or Guardian):**

Name

Relationship

Address:

Business Phone

Home Phone

Cell Phone

Who should receive school correspondence such as grades, progress reports etc.?

Mother ☐ Father ☐ Guardian ☐ Other ☐ (Please specify) _____.

Who would you like the primary contact to be regarding academic and social issues?

Parent Signature

Date

Home Language Survey

The Arizona State Board of Education requires schools to determine the language spoken at home by each student. This information is essential in order for schools to provide meaningful instruction for all students.

Your cooperation in helping us meet this requirement is requested. Please answer the following questions. Thank you for participating in the student's education.

Name of Student: _____ Age: _____ Male ☐ Female ☐

1. Which language did the student learn when first beginning to talk?

2. What language did the student most frequently use at home? _____

3. What language do you use most frequently to speak to the student?

4. What is the language most often spoken by the adults at home? _____

5. Are there any other languages spoken at home? ☐ Yes ☐ No. By whom?

6. Check language(s) spoken at home:

A. English _____

B. Navajo _____

C. Spanish _____

D. Other _____

SIGNATURE OF PARENT/GUARDIAN

Date

Ponderosa High School
121 East Birch Ave., Suite 200
Flagstaff, AZ 86001
Telephone: (928) 779-6880
Fax: (928) 779-6888

Permission to Obtain Educational Records

I hereby authorize _____
School Name/Address/Phone/Fax

to release any and all medical, educational, psychological, sociological, and speech and language reports and/or records pertaining to:

STUDENT NAME DATE OF BIRTH

This information is needed by the professional staff to make the best placement for this student and will be held in confidence by the professional staff.

SIGNATURE OF PARENT/GUARDIAN DATE

Permission to Release Educational Records

I hereby authorize Coconino County Regional Accommodation School District to furnish educational records to: _____
SCHOOL NAME

It is understood that this information is confidential and will be treated accordingly.

SIGNATURE OF PARENT/GUARDIAN DATE